FORM D

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UNITED STATES

ECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

1391351

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response... 16.00

SEC USE ONLY

Prefix

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Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Interest in raw land-Thornton Road, Casa Grande, Arizona Filing Under (Check box(es) that [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE apply): Type of Filing: [X] New Filing [] Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) **DBSI Thornton Road Units LLC** (Number and Street, City, State, Zip Code) Address of Executive Offices Telephone Number (Including Area Code) 1550 S. Tech Lane Meridian, ID 83642 800-678-9110 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) **Brief Description of Business** Interest in Real Property Type of Business Organization PROCESSED [] limited partnership, already formed [X] other (please specify): | corporation Limited Liability Company [] business trust [] limited partnership, to be formed MAR 0.8 2007 THOMSON Month Year FINANCIAL Actual or Estimated Date of Incorporation or Organization: [01] [07] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [1][D] GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[X] Promoter [X] Beneficial Owner	[] Executive Officer	[] Director [X]	Managing Member
Full Name (Last name DBSi Housing, Inc.	first, if individual)				
Business or Residence 1550 S. Tech Lane, M		d Street, City,	State, Zip Code)	-	
Check Box(es) that Apply:	[] Promoter [X]	Beneficial Owner	[X] Executive Officer	[X] Director [General and/or Managing Partner
Full Name (Last name Swenson, Douglas L.					
Business or Residence 1550 S. Tech Lane, M		d Street, City,	State, Zip Code)		
Check Box(es) that Ap	ply: [] Promoter [] E	Beneficial Own	er [X] Executive Office	er [X] Director []	General and/or Managing Partner
Full Name (Last name Hassard, Charles E.	first, if individual)				
Business or Residence 1550 S. Tech Lane, M		d Street, City,	State, Zip Code)		
Check Box(es) that Ap	ply: [] Promoter [] E	deneficial Own	er [X] Executive Office	er [X] Director []	General and/or Managing Partner
Full Name (Last name Mayeron, John M.	first, if individual)				
Business or Residence 1550 S. Tech Lane, M		d Street, City,	State, Zip Code)	· · · · ·	And the second s

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING														
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3. Does the offering permit joint ownership of a single unit?														
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	Full Name (Last name first, if individual) Crown Capital Securities, L.P.												
	Business or Residence Address (Number and Street, City, State, Zip Code) 725 Town & Country Road, Suite 530, Orange, CA 92868												
Name o	Name of Associated Broker or Dealer												
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Full Name (Last name first, if individual)													
Cullum & Burks Securities, Inc.													
Business or Residence Address (Number and Street, City, State, Zip Code) One Galleria Tower, Dallas, TX 75240													
Name of Associated Broker or Dealer													
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Full Name (Last name first, if individual) Direct Capital Securities													
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First Montauk Securities Corp. Business or Residence Address (Number and Street, City, State, Zip Code) 328 Newman Springs Rd., Red Bank, NJ 07701 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [x] All States [AZ] [CA] [AL] [AK] [AR] (CO) (CTI [DE] (DC) [FL] [GA] [HI] [IDI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [NV] [NM] [NH] [NJ] [NY] [NC] (ND) [OK] (OR) [PA] [MT] [NE] [OH] [RI] [SC] [SD] [TN] [UT] [VT] [WA] [WV] [WI] [WY] [PR] [TX] [VA] Full Name (Last name first, if individual) Independent Financial Group, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 7425 Mission Valley Road, Suite 203, San Diego, CA 92108 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [] All States [AL] x $[AK] \times [AZ] \times [AR] \times$ [CA] x [CO] x [DC] [GA] x [HI] x [ID] x [CT] x [DE] [FL] x $[MA] \times$ [MS] x IKS1 x [KY] x ME1 x (MD1 x [MI] x [MN] x [MO] x [IL] x [IN] x [IA] x[LA] x $[NE] \times [NV] \times [NH]$ [OK] [MT] x [NJ] x [NM] x [NY] x [NC] x [ND] x [OH] x [OR] x [PA] x $[SC] \times [SD] \times [TN] \times [TX] \times$ WV] x IWII x $[WY] \times [PR]$ [RI] x [UT] x M [VA] x [WA] x Full Name (Last name first, if individual) KMS Financial Services, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 2001 Sixth Ave., Suite 2801, Seattle, WA 98121 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [] All States [AL] x [AK] [AZ] x[AR] x [CA] x [CO] x (CT) x (DE) x [DC] x [FL] x [GA] x [HI] x [ID] x [KS] x [KY] x (ME) x [MD] x [MI] x [MN] x [IL] x (IN) x [[A]] x [LA] x [MA] x[MS] x [MO] x [NE] x [NV] x [MT] x INHI [NJ] x [NM] x [NY] x [NC] x [ND] x [HO] [OK] x [OR] x [PA] x [RI] x $[SC] \times [SD] \times [TN] \times [TX] \times$ [UT] x [VT][VA]x[WA] x [WV] x [WI] x [WY] x [PR] Full Name (Last name first, if individual) MCL Financial Group, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 1869 W. Littleton Blvd., Littleton, CO 80120 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [] All States [AL] x [AK] $[AZ] \times [AR] \times [CA] \times$ [CO] x [CT] x (DE) x [DC] x [FL] x [GA] x [HI] x (ID) x []L] x [IN] x [[A] x [KS] x [KY] x [LA] x [ME] x [MD] x [MA] x[MI] x [MN] x [MS] x [MO] x [OK] x $[MT] \times [NE] \times$ {NV} x [NH] [NJ] x [NC] x [ND] [NM] x [NY] x (OH) x [OR] x [PA] x [SC] x [SD] x [TN] x [RI] x $|TX| \times$ [UT] x [VT][VA] x (WA) x [WV] x [WI] x WY] x [PR]

Full Name (Last name first, if individual)

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	Business or Residence Address (Number and Street, City, State, Zip Code) 10542 S. Jordan gateway, Ste. 330, Salt Lake City, UT 84065													
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Full Name (Last name first, if individual) Private Consulting Group														
Business or Residence Address (Number and Street, City, State, Zip Code 4650 S.W. Macadam Ste. 100, Portland, OR 97239														
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	Business or Residence Address (Number and Street, City, State, Zip Code) 4261 Park Road, Ann Arbor, MI 48103												
Name	of Assoc	iated Bro	ker or De	aler	-								
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Full Name (Last name first, if individual) Sawtooth Securities LLC													
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	Full Name (Last name first, if individual) United Securities Alliance											
Busine 1821 5	Business or Residence Address (Number and Street, City, State, Zip Code) 1821 56 th Ave. Ste. B, Greeley, CO 80634											
Name	Name of Associated Broker or Dealer											
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Aggregate	Amount Already
Type of Security	Offering Price	Sold
Debt	\$	\$
Equity	\$	\$
[] Common [] Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify <u>Tenant in Common Interest</u>).	\$3,500,000.00	
Total	\$3,500,000.00	\$0
Answer also in Appendix, Column 3, if filing under ULOE.	φ <u>ο,υου,υου.υσ</u>	Ψ <u>υ</u>
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504 , indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
	Number	Dollar Amount
	Investors	of Purchases
Accredited Investors	0	\$0
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		\$ <u>0</u>
Answer also in Appendix, Column 4, if filing under ULOE.		<u>-</u> Ψ <u>σ</u>
Answer also in Appendix, Solution 4, it limits and of Sect.		
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Tune of Coougity	Dollar Amount
Type of offering	Type of Security	Sold
Rule 505		\$
Regulation A		_\$
Rule 504		\$
Total		\$0
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		[] \$
Printing and Engraving Costs		[X] \$3,000.00
Legal Fees		[X] \$40,000.00
Accounting Fees		[]\$
Engineering Fees		[]\$
		[X] \$ <u>283,912.00</u>
Sales Commissions (specify finders' fees separately)		
Other Expenses (identify) Marketing, Wholesaling, and Organizational Expenses	1	[X] \$200,946.00
Total		[X] \$ <u>527,858.00</u>
b. Enter the difference between the aggregate offering price given in response to Part C - expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted issuer."		
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or propos	sed	

to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Salaries and fees	Dir Affi []\$	icers, ectors, & iliates \$	Payments To Others [] \$
Purchase, rental or leasing and installation of machinery and equipment	[14	\$	[]\$
Construction or leasing of plant buildings and facilities	[]5	\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$	[]\$
Repayment of indebtedness		\$	[]\$
Working capital		\$ <u></u>	[]\$
Other (specify): Accountable Reserves	[13	<u> </u>	[X] \$54,619.00 [X] \$25,000.00
Acquisition Related Expenses Due Diligence Analysis			[X] \$ <u>31,999.00</u>
Column Totals	[X]	\$ <u>113,999.00</u>	[X]\$2,907,041.00
otal Payments Listed (column totals added)		[X] \$ <u>3,021</u>	<u>,040.00</u>
D. F	EDERAL SIGNATURE		
he issuer has duly caused this notice to be signed by the uncollowing signature constitutes an undertaking by the issuer to its staff, the information furnished by the issuer to any non-a	furnish to the U.S. Securities and E	xchange Commission	on, upon written request
suer (Print or Type)	Signature Date		
DBSI Thornton Road Units LLC, an Idaho LLC ame of Signer (Print or Type)	7/2 Title of Signer (Printor Type)	6/07	
By DBSi Housing, Inc. its member	Josh Hoffman, its Authorized Rep	presentative	

Payments to

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

[E. STATE SIGNA	TURE					
See Appendix, Column 5, for state response. Yes No [] [X]"							
2. The undersigned issuer hereby undertakes to furnish to a (17 CFR 239,500) at such times as required by state law.	any state administr	rator of any	state in which this noti	ce is filed, a notice on Form D			
3. The undersigned issuer hereby undertakes to furnish to the offerees.	he state administr	ators, upon	written request, inform	nation furnished by the issuer			
4. The undersigned issuer represents that the issuer is famil Offering Exemption (ULOE) of the state in which this notice has the burden of establishing that these conditions have be	is filed and under						
The issuer has read this notification and knows the contents undersigned duly authorized person.	s to be true and ha	as duly caus	sed this notice to be sig	ned on its behalf by the			
Issuer (Print or Type)	Signature		Date				
DBSI Thornton Road Units LLC, an Idaho LLC Name of Signer (Print or Type)	Title (Print or T	ype)	2/26/07				

Josh Hoffman, its Authorized Representative

Instruction:

By **DBSI Housing, Inc.**, its member

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

